

BEST AVAILABLE COPY

| | | | |
|---|--|--|--|
| PATENT APPLICATION FEE DETERMINATION RECORD | | | Application or Docket Number 09 815,892 09815892 |
| Effective October 1, 2000 | | | |

CLAIMS AS FILED - PART I

| | | |
|---|---------------|--------------|
| (Column 1) | | (Column 2) |
| TOTAL CLAIMS | 23 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 23 - minus 20 | 3 |
| INDEPENDENT CLAIMS | 5 - minus 3 | 2 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

| RATE | FEES | RATE | FEES |
|-----------|--------|--------------|--------|
| BASIC FEE | 355.00 | OR BASIC FEE | 710.00 |
| X3 9= | | OR X318= | 54 |
| X40= | | OR X80= | 160 |
| +135= | | OR +270= | |
| TOTAL | | OR TOTAL | 920 |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

6/16/00

| | | | |
|---|---|---|------------------|
| (Column 1) | | (Column 2) | (Column 3) |
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 30 | Minus | 23 - 7 |
| Independent | 5 | Minus | 5 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|-----------------|------------------------|--------------------|------------------------|
| X3 9= | | OR X318= | 66.00 |
| X40= | | OR X80= | |
| +135= | | OR +270= | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

3/26/05

| | | | |
|---|---|---|------------------|
| (Column 1) | | (Column 2) | (Column 3) |
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 23 | Minus | 30 - |
| Independent | 3 | Minus | 5 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|-----------------|------------------------|--------------------|------------------------|
| X3 9= | | OR X318= | |
| X40= | | OR X80= | |
| +135= | | OR +270= | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

| | | | |
|---|---|---|------------------|
| (Column 1) | | (Column 2) | (Column 3) |
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | | Minus | - |
| Independent | | Minus | - |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|-----------------|------------------------|--------------------|------------------------|
| X3 9= | | OR X318= | |
| X40= | | OR X80= | |
| +135= | | OR +270= | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

- If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.
- If the "Highest Number Previously Paid For" in this space is less than 20, enter "20."
- If the "Highest Number Previously Paid For" in this space is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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